ACKNOWLEDGEMENT, INDEMNIFICATION AND RELEASE

STUDENT ORGANIZATION SPONSORED ACTIVITES

NAME OF STUDENT ORGANIZATION:         
  
NAME OF ACTIVITY:

I am a member of the above identified SSU Student Organization and I desire to participate in the above identified Activity.

I understand and acknowledge that this is an SSU Organization sponsored Activity and that the University is not a sponsor and is not responsible for the Activity.

I further understand and acknowledge:

* There are risks and hazards that may arise from participation in the Activity and that these risks and hazards may result in injury, death, damage to and/or loss of property.
* My participation in the Activity is entirely voluntary.
* I am still subject to the SSU Student Conduct Code while participating in this Activity and I will follow available safety measures and instructions.
* SSU is not legally responsible for my personal safety or the safety of my property during the Activity.
* It is my responsibility to obtain personal health insurance.

I assure SSU and the Student Organization that I am not aware of any health related or medical reason why I should not participate in the Activity.

To the extent permitted by law, I, for myself, my executors, administrators, and assigns, release and forever discharge SSU and its Board of Trustees, officers, employees and agents and the Organization from all claims of losses, damages, injuries or costs, and any actions whatever, including, but not limited to, those based on negligence, in any manner arising out of my participation in this activity. I understand that this Release means that, among other things, I am giving up my right to sue Shawnee State University and/or the Organization for any such losses, damages, injuries, or costs that I may occur.

**I have carefully read this agreement and understand it to be a release of all claims and causes or action for my injury or death or damage to my property that occurs while participating in the described activity and it obligates me to indemnify the parties named for any liability for injury or death of any person and damage to property caused by my negligent or intentional act or omission.**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
Printed Name

IF PARTICIPANT IS UNDER 18 YEARS OLD

Printed Name of Parent/Legal Guardian: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature Date